



Community Development Department
 818 E Edison Ave. Sunnyside, WA 98944
 (509) 837-7999 Fax (509) 86-6383

Boundary Line Adjustment/Parcel Combination Application

Lot/Boundary Line Adjustment Parcel Combination

Note: Any person desiring to combine or segregate parcels for tax purposes must first obtain a letter of approval from the Development Services Department.

OWNER INFORMATION (Parcel A) Contact Person

Owner:
 Address:
 Phone: _____ Email: _____

PROPERTY INFORMATION (Parcel A)

Parcel #:
 Legal Description:

OWNER INFORMATION (Parcel B) Contact Person

Owner:
 Address:
 Phone: _____ Email: _____

PROPERTY INFORMATION (Parcel B)

Parcel #:
 Legal Description:

APPLICANT INFORMATION (if different) Contact Person

Contact:
 Address:
 Phone: _____ Email: _____

PROJECT DESCRIPTION

WATER/SEWER/IRRIGATION

Water Supply: <input type="checkbox"/> Well <input type="checkbox"/> City	<input type="checkbox"/> Sewer <input type="checkbox"/> Septic Tank*
Irrigation Water Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	*Requires submittal of Yakima County Health District verification that all health district regulations have been met.
Private Irrigation Line? <input type="checkbox"/> Yes <input type="checkbox"/> No	

APPLICATION MUST INCLUDE

1. Completed application and filing fee

2. For Lot/Boundary Line Adjustment:
 - a. One (1) .pdf of proposed survey
 - b. One (1) 11" x 17" paper copy of proposed survey
 - c. Two (2) full size paper copies of proposed survey
3. For Parcel Combination:
 - a. One (1) .pdf of proposed site plan showing all lots to be combined
 - b. One (1) 11" x 17" paper copy of proposed site plan showing all lots to be combined
4. Other information as determined by the Administrator

I authorize employees and officials of the City of Sunnyside the right to enter and remain on the property in question to determine whether a permit should be issued and whether special conditions should be placed on any issued permit. I have the legal authority to grant such access to the property in question.

I also acknowledge that if a permit is issued for land development activities, no terms of the permit can be violated without further approval by the permitting entity. I understand that the granting of a permit does not authorize anyone to violate in any way any federal, state, or local law/regulation pertaining to development activities associated with a permit.

I hereby certify under penalty of perjury under the laws of the State of Washington that the following is true and correct:

1. I have read and examined this permit application and have documented all applicable requirements on the site plan.
2. The information provided in this application contains no misstatement of fact.
3. I am the owner(s), the authorized agent(s) of the owner(s) of the above referenced property, or I am currently a licensed contractor or specialty contractor under Chapter 18.27 RCW or I am exempt from the requirements of the Chapter 18.27 RCW.
4. I understand this permit is subject to all other local, state, and federal regulations.

Note: This application will not be processed unless the above certification is endorsed by an authorized agent of the owner(s) of the property in question and/or the owner(s) themselves. If the City of Sunnyside has reason to believe that erroneous information has been supplied by an authorized agent of the owner(s) of the property in question and/or by the owner(s) themselves, processing of the application may be suspended.

Applicant Printed Name: _____

Applicant Signature: _____ Date _____



Boundary Line Adjustment/Parcel Combination Application Authorization Page

PROPERTY OWNER'S AUTHORIZATION (use additional sheets if needed)

Parcel A

I, _____ (print name), being duly sworn, attest that I am a property owner owning property referenced on the accompanying application, and that I authorized the submittal of a boundary line adjustment on the subject property to Richland Department of Development Services for review.

Signature _____ Date _____

Parcel B

I, _____ (print name), being duly sworn, attest that I am a property owner owning property referenced on the accompanying application, and that I authorized the submittal of a boundary line adjustment on the subject property to Richland Department of Development Services for review.

Signature _____ Date _____

State of Washington

County of _____

SIGNED AND SWORN TO BEFORE ME THIS _____

DAY OF _____, 20_____

Notary Seal

Signature of Notary Public

Printed Name

My appointment expires: _____